

Run Date: 09/15/2015

AZ DEPARTMENT OF WATER RESOURCES

WELL REGISTRY REPORT - WELLS55

Location A 7.0 2.0 26 D A D Well Reg.No 55 - 086134 AMA PHOENIX AMA

Registered Name MICHAEL C & ALMA A HUDSON
2739 W SUNSET DR

File Type NEW WELLS (INTENTS OR APPLICATIONS)
Application/Issue Date 11/05/1980

NEW RIVER AZ 85087

Owner OWNER
Driller No. 35
Driller Name CAMPBELL'S DRILLING, INC.
Driller Phone
County MARICOPA
Parcel No. 202-11-057B
Intended Capacity GPM 0.00

Well Type EXEMPT
SubBasin LAKE PLEASANT
Watershed AGUA FRIA RIVER
Registered Water Uses DOMESTIC
Registered Well Uses WATER PRODUCTION
Discharge Method NONE
Power NO POWER CODE LISTED

| | | | | | |
|------------|--------|-------------|--------|------------|----------------|
| Well Depth | 160.00 | Case Diam | 5.00 | Tested Cap | 0.00 |
| Pump Cap. | 0.00 | Case Depth | 160.00 | CRT | |
| Draw Down | 0.00 | Water Level | 44.00 | Log | |
| | | Acres Irrig | 0.00 | Finish | PLASTIC OR PVC |

Contamination Site: NO - NOT IN ANY REMEDIAL ACTION SITE

Tribe: Not in a tribal zone

Comments

Current Action

9/15/2015 860 CHANGE OF WELL OWNERSHIP
Action Comment: sym

Action History

11/20/1980 755 WELL CONSTRUCTION COMPLETED
Action Comment:
11/20/1980 750 WELL DRILLER REPORT AND WELL LOG RECEIVED/ENTERED
Action Comment:



Arizona Department of Water Resources
Water Management Division
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

FILE NUMBER

A(7-2)26 DAD

WELL REGISTRATION NUMBER

55 - 006134

SECTION 1. REGISTRY INFORMATION

| | | | |
|---|----------|---|--|
| Well Owner | | Location of Well | |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Vince Cedola | | WELL LOCATION ADDRESS (IF ANY) 2739 W. Sunset Dr, New River | |
| MAILING ADDRESS 47854 N 27th Ave | | TOWNSHIP (N/S) 2E | RANGE (E/W) 26 |
| CITY / STATE / ZIP CODE New River, AZ 85027 | | SECTION SE 1/4 | 160 ACRE NE 1/4 |
| CONTACT PERSON NAME AND TITLE Vince Cedola | | 40 ACRE SE 1/4 | 10 ACRE SE 1/4 |
| TELEPHONE NUMBER — | FAX — | METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade | |
| | | *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify): | |
| | | COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 202 MAP 4 PARCEL 057 B | COUNTY WHERE WELL IS LOCATED Maricopa |

Type of Request (CHECK ONE)

- ☐ Change of Well Drilling Contractor (Fill out Section 2) ☒ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.

| | | | |
|---|-----|---|----------------------|
| Current Well Drilling Contractor | | New Well Drilling Contractor | |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL | | FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL | |
| DWR LICENSE NUMBER | | DWR LICENSE NUMBER | ROC LICENSE CATEGORY |
| TELEPHONE NUMBER | FAX | TELEPHONE NUMBER | FAX |

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

| | | | |
|---|----------|--|----------|
| Previous Well Owner | | New Well Owner | |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Vince Cedola | | FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Michael C. and Alma G. Hudson | |
| MAILING ADDRESS 47854 N. 27th Ave | | MAILING ADDRESS 2739 W. Sunset Drive | |
| CITY / STATE / ZIP CODE New River, AZ 85027 | | CITY / STATE / ZIP CODE New River, AZ | |
| CONTACT PERSON NAME AND TITLE Vince Cedola | | CONTACT PERSON NAME AND TITLE Michael Hudson | |
| TELEPHONE NUMBER — | FAX — | TELEPHONE NUMBER — | FAX — |

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☒ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE

Vince Cedola

SIGNATURE OF WELL OWNER

[Signature]

DATE

6/28/15

Recording Requested by:
First American Title Insurance Company

14

Ho:

When recorded mail to:
Michael C. Hudson and Alma A. Hudson
2739 West Sunset Drive
New River, AZ 85087

WARRANTY DEED

Escrow No. 431-5709187 (mcs)

For the consideration of TEN AND NO/100 DOLLARS, and other valuable considerations, I or we,

Vincent J. Cedola and Vera L. Cedola, Trustees of The Cedola Family Trust, dated April 5th, 2012, the GRANTOR does hereby convey to

Michael C. Hudson and Alma A. Hudson, husband and wife, the GRANTEE

The following described real property situate in Maricopa County, Arizona with the title being conveyed to the grantee as set forth in the attached acceptance by the grantee:

THE WEST HALF OF THE FOLLOWING DESCRIBED PROPERTY:

THE NORTH HALF OF THE SOUTH HALF OF THE NORTHEAST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 26, TOWNSHIP 7 NORTH, RANGE 2 EAST, OF THE GILA AND SALT RIVER BASE AND MERIDIAN, MARICOPA COUNTY, ARIZONA.

EXCEPT THE WEST 655 FEET THEREOF.

Pursuant to ARS 33-404, Beneficiaries names and addresses are Vincent J Cedola and Vera L. Cedola 75-5865 Walua Apt D409 Kailua Kona, HI 96740.

Subject To: Existing taxes, assessments, covenants, conditions, restrictions, rights of way, easements and all other matters of record.

And the GRANTOR does warrant the title against all persons whomsoever, subject to the matters set forth above.

DATED: June 01, 2015

File No.: 431-5709187 (mcs)
A.P.N.: 202-11-057B7

Warranty Deed - continued

SEE ACCEPTANCE ATTACHED HERETO

AND BY REFERENCE MADE A PART HEREOF.

Vincent J. Cedola and Vera L. Cedola,
Trustees of The Cedola Family Trust, dated
April 5th, 2012

Vincent J. Cedola, Trustee

Vincent J. Cedola, Trustee

Vera L. Cedola, Trustee

Vera L. Cedola, Trustee

STATE OF Hawaii)
County of Hawaii) ss.

On 24 June 2015, before me, the undersigned Notary Public,
personally appeared Vincent J. Cedola, Vera L. Cedola, Trustees of The Cedola Family Trust personally
known to me (or proved to me on the basis of ^{Unofficial Document} satisfactory evidence) to be the person(s) whose name(s)
is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same
in his/her/their authorized capacity(ies) and that his/her/their signature(s) on the instrument the
person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

My Commission Expires: 6/27/16

Tani Golden

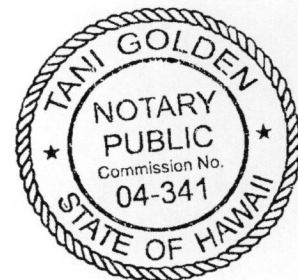
Notary Public

Doc. Date: 6/23/15 # Pages 2

Notary Name: Tani Golden Third Circuit

Doc. Description Warranty

Deeds
Tani Golden 24 June 15
Notary Signature Date



File No.: 431-5709187 (mcs)
A.P.N.: 202-11-057B7

Warranty Deed - continued

ACCEPTANCE OF COMMUNITY PROPERTY WITH RIGHT OF SURVIVORSHIP

This Acceptance is to be attached to: Warranty Deed dated 06/01/2015 by and between The Cedola Family Trust and Michael C. Hudson and Alma A. Hudson.

That each of the undersigned individually and jointly as such Grantees hereby declare that it is their intention to accept this conveyance as community property with right of survivorship and not as joint tenants with right of survivorship and not as tenants in common, and to acquire any interest in said real property under said deed as community property with right of survivorship, and not as joint tenants with right of survivorship and not as tenants in common.

That by the execution and delivery to the Escrow Agent of this "Acceptance of Community Property with Right of Survivorship" the undersigned intend to evidence their acceptance of said deed as community property with right of survivorship, and hereby direct and authorize the Escrow Agent to attach this "Acceptance of Community Property with Right of Survivorship" to such deed upon its execution and delivery and to record this "Acceptance of Community Property with Right of Survivorship" together with such deed.

Date: 06/01/2015

Michael C Hudson
Michael C. Hudson

Unofficial Document

Alma A. Hudson by
Michael C Hudson as
attorney in fact
Alma A. Hudson by Michael C. Hudson as
Attorney In Fact

STATE OF AZ)
County of Maricopa) ss.

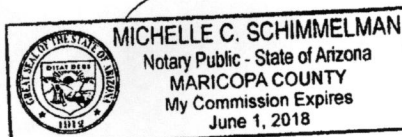
On June 23rd 2015, before me, the undersigned Notary Public, personally appeared **Michael C. Hudson and Alma A. Hudson By Michael C. Hudson Attorney in Fact**, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

My Commission Expires:

June 1st 2018

Michelle C Schimmelman
Notary Public



MAP ID • 726 - 26 - 04 - 01



BOOK: 202

SCALE: 1" = 100'

www.maricopa.gov/assessor

Disclaimer - Indemnification

Requester/Purchaser understands and agrees that Maricopa County does not guarantee the accuracy of the data and information requested and hereby expressly disclaims any responsibility for the truth, lack of truth, validity, timeliness, accuracy, incompleteness, or any other data and information. The user relies on such data

Arizona Department of Water Resources

3550 N Central Ave.
Phoenix AZ 85012

Customer:

FIRST AMERICAN TITLE
INSURANCE COMPANY
39508 W. DAISY MOUNTAIN DRIVE,
SUITE 128
PHOENIX, AZ 85086

Receipt #: 16-41454
Office: MAIN OFFICE
Receipt Date: 09/09/2015
Sale Type: IN_PERSON
Cashier: WRSYM

| Item No. | Index | AOBJ | Description | Ref ID | Qty | Unit Price | Ext Price |
|----------------|-------|---------|---|--------|-----|------------|-----------|
| 81213 | 15239 | 4439-TT | Change of Ownership/Change of Well Information/Well Assignment | 086134 | 1 | 30.00 | 30.00 |
| RECEIPT TOTAL: | | | | | | | 30.00 |

Payment type: CHECK

Amount Paid: \$30.00

Payment Received Date: 09/09/2015

Notes: FROM TTA.

Check # 200532103

First American Title Insurance Company, Phoenix
PR. 4000 Ofc. 4431 (2005)

CHECK NO. 200532103

DATE: 06/25/2015 FILE NO: 431-5709187

SETTLEMENT DATE: 06/25/2015

CHECK AMOUNT: \$30.00

BUYER: Hudson

SELLER: The Cedola Family Trust

Property Address: 2739 West Sunset Drive, New River, AZ 85087

Funds Due

Charge Details:
Well Transfer:

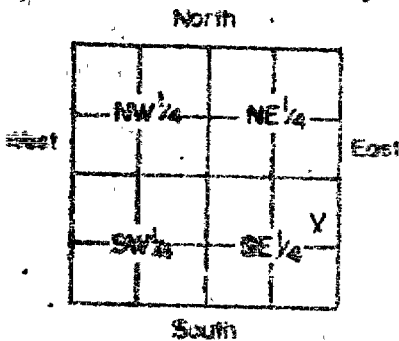
Re: 55-

30.00

FILE FEE: \$3.00

NOTICE OF INTENTION TO DRILL OR DEEPEN AN EXEMPT WELL

Section 45-596, Arizona Revised Statutes, provides: A person may not drill or cause to be drilled a well or deepen or replace an existing well without first filing a Notice of Intention to Drill with the Department on a form prescribed and furnished by the Department. The well shall be completed within one year after the date of Notice. An exempt well means a well having a pump with a maximum design capacity of not more than 35 gallons per minute which is used to withdraw groundwater. An exempt well may include the non-commercial irrigation of not more than 1 acre of land.



Indicate Well Location by X
(Above diagram represents one
360 acre section)

DESCRIPTION OF WELL:

8. Diameter 5"
Depth 200'
9. Type of Casing PVC

10. Principle use of Water
Domestic

11. Other uses Intended

(If for non-commercial irrigation, state approximate area being cultivated.)

12. Construction will start about:

11 Month 80 Year

PLACE OF USE:

13. Township 7 W N
14. Range 2 E
15. Section 26

16. Legal description of land water is to be used on:

E 1/2, N 1/2, S 1/2, NE 1/4, SE 1/4

17. Design Pump Capacity

10

18. Action Requested:

Drill X
Deepen
Replace

19. This notice filed by:

Owner
Lessee
Driller X

LL/LAND LOCATION:

1. Township 7 W N

2. Range 2 E

3. Section 26

4. E 1/2 N 1/2 S 1/2 NE 1/4 SE 1/4
10 acre sub-division

County Mazda

Owner of Well: WALTER D. OTTNEY
Doug Kitter

Box 2972 NRS

Phy Az 85009
y State Zip

Owner of Land: Doug Kitter

Box 2972 NRS

Phy Az 85009
y State Zip

| | |
|---|--|
| DO NOT WRITE IN THIS SPACE | |
| OFFICE RECORD | |
| FILE NO. <u>A(7-2)26 dad</u> | |
| FILED <u>10-30-80</u> BY <u>PL</u> | |
| NOV 4 1980 | |
| EXPLICATE DATED <u>11-5-80</u> BY <u>PL</u> | |
| REGISTRATION NO <u>55-86134</u> | |
| NON-EXPANSION AREA <u>Phoenix</u> | |

Campbell's Drilling Co

Name Box 933
Address Wickenburg Az 85358
City Wickenburg State Az Zip 85358

20. Drillers Name: Charles E. Campbell

Name Box 933
Address Wickenburg Az 85358
City Wickenburg State Az Zip 85358

46892 T-35
Department License Number

Fill out this form in duplicate and mail to P.O. Box 2600, Phoenix, Arizona, 85002, or deliver to 222 N. Central Ave., Suite 550, Phoenix, Arizona, 85004.

If the Exempt Well is in fact a replacement (or deepening) well, state the registration number of the existing well.

Construction standards for new and replacement wells and the deepening and abandonment of existing wells, shall be in accordance with Department Rules and Regulations.

Charles E. Campbell, state that the construction will be under the direct and personal supervision of the well driller designated on this form and that the designated driller holds contractors license pursuant to ARS 45-595.

10-28-80

MICROFILMED

Walter D. Campbell
Signature of Person Filing

WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1. Owner Walter D. Ottney
~~Don Kider~~ Name P.O. Box 41073 - PHOENIX, AZ 85080
Box 2972 N.R.S. Address Phoenix Az 85029
2. Lessee or Operator _____
Name _____
Address _____
3. Driller Campbells Drilling Inc
Name _____
Box 933 Address Wickenburg Az 85358
4. Location of well SENESE T7N R2E Sec26
5. Permit No. _____
(if issued) _____

DESCRIPTION OF WELL

6. Total depth of hole 160 ft.
7. Type of Casing PVC
8. Diameter and length of casing 5 in. from 0 to 160', _____ in from _____ to _____.
9. Method of sealing at reduction points _____
10. Perforated from 80' to 160', from _____ to _____, from _____ to _____
11. Size of cuts 1/8" Number of cuts per foot 8
12. If screen was installed: Length _____ ft. Diam _____ in. Type _____
13. Method of construction Drilled
drilled, dug, driven, bored, jetted, etc.
14. Date started 11 20 80
Month day year
15. Date completed 11 20 80
Month day year
16. Depth to water 44' ft. (If flowing well, so state.)
17. Describe point from which depth measurements were made, and give sea-level elevation if available.

18. If flowing well, state method of flow regulation _____

19. REMARKS: _____

DO NOT WRITE IN THIS SPACE
OFFICE RECORD

Registration No. 55-86134

Received _____ By _____

Entered 12-23-80 By But

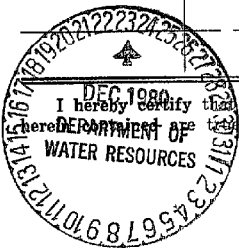
File No. A(7-2)26dad

(Well log to appear on Reverse side)

MICROFILMED

LOG OF WELL

Indicate depth at which water was first encountered, and the depth and thickness of water bearing beds. If water is artesian, indicate depth at which encountered, and depth to which it rose in well,

[illegible]

Driller Charles F. Taylor Name

Box 933... Wickenburg, Az.
Address

Date 12-22-88...

State of Arizona

DEPARTMENT OF WATER RESOURCES

222 North Central Avenue, Suite 850, Phoenix, Arizona 85004



November 5, 1980

~~Doug Kitter~~
Box 2972 New River Stage
Phoenix Az 85029

Registration No. 55-86134

Dear Well Owner:

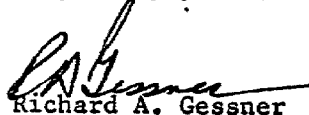
A copy of Notice of Intention to Drill a Well is returned to you for your records. Your driller has been mailed separately a Well Drilling Card, Well Drilling Report, and a Completion Report.

ARS 45-600 requires the driller to furnish this Department a complete and accurate log of the well within 30 days of completion of drilling, and a Completion Report within 30 days after installation of pumping equipment.

Also enclosed for your future use is a Change of Well Information Form. Per ARS 45-493, the person to whom a well is registered shall notify this Department of a change in ownership of the well and information pertaining to the physical aspects of the well to keep the well registration record current and accurate.

In the event it is necessary to change the location of the proposed well, you should obtain the written permission of the Department of Water Resources before proceeding with the drilling.

Very truly yours,


Richard A. Gessner
Chief, Records Section

RAG
Enclosures

MICROFILMED

Think Conservation!

Administration 255-1550, Water Resources and Flood Control Planning 255-1566, Dam Safety 255-1541,
Flood Warning Office 255-1548, Water Rights Administration 255-1581, Hydrology 255-1586

Campbells Drilling Inc.
Box 933
Wickenburg, AZ 85358

STATE OF ARIZONA
ARIZONA WATER COMMISSION
WATER RIGHTS ADMINISTRATION
222 N CENTRAL AVE - SUITE 550
PHOENIX, ARIZONA 85004

RECEIPT - FILE

For: ~~Doug Kitter~~
WALTER D. OTTNEY

No 6677

| KIND ENTRY | FILE REFERENCE NO. |
|---------------|--------------------|
| 55 | 86134 |
| | THRU |

| ACCOUNT NO. | | | | INT. ACCT. | ITEM DESCRIPTION | RATE | \$ AMOUNT |
|-------------|--------|---------|------|---------------|---|----------------|-----------|
| NO | AGENCY | CHAPTER | DIV. | | | | |
| | | | | | Filing fee for Notice of Intention to Drill | | 3.00 |
| | | | | | or Deepen an Exempt Well | | |
| | | | | | Water Rights (GW) | | |
| | | | | | | WAITER PAYMENT | |
| | | | | | | GUESTS | 1 |
| | | | | | | CHK NO | 3251 |
| | | | | | File #A(7-2)26 dad | 55-I | 3.00 |
| | | | | | | TAX | 0.00 |
| | | | | | Registration #55-86134 | TOTL | 3.00 |
| | | | | | | GEN.CHEK | 3.00 |
| | | | | | Check #3251 | # 550 A | 18:19 |

MICROFILMED

10-03-80

TOTAL

\$ 3.00

DEPARTMENT OF WATER RESOURCES
99 East Virginia Avenue
Suite 100
Phoenix, Arizona 85004

Attney

CHANGE OF WELL INFORMATION

Registration Number 55- 086134

I request the following information be changed in Well File Number A(7-2)26 dad

Date _____, 19____ Signature of Well Owner _____

STATEMENT OF CHANGE OF WELL OWNERSHIP

I, Ms Selva C. Apodaca, state that I am (~~the former~~) the (new) owner of the well described below:

Township TN Range 2 E Section 26, SE 1/4 NE 1/4 SE 1/4

Registration #55- 086134

File No. A(72)26 dad

Walter D Ottney
Previous Owner

Mr. Tomas - Apodaca
Ms Selva C. Apodaca
New Owner

P.O. Box 41073
Address

3119 W. Surrency Ave
Address

Phoenix, AZ 85080
City State Zip

Phoenix, AZ 85029
City State Zip

NOTE: ARS §45-593 requires that the Department be notified of change of well ownership and that the well owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within 30 days after changes take place.

NOTE: SAVE THIS FORM TO REPORT FUTURE
CHANGES IN OWNERSHIP OR WELL
DATA SUCH AS PUMP CAPACITY, ETC.

ENTERED AUG 18 1986

CHANGE OF WELL INFORMATION

Registration Number 55-86134

I request the following information be changed in well file number A(7-2)26dad

Date

Signature of Well Owner

STATEMENT OF CHANGE OF WELL OWNERSHIP

I Douglas H. Kidder, state that I am (no longer)
(new) owner of the well described below:

TWP 7N RGE 2E, SEC. 26, SE 1/4, NE 1/4, SE 1/4.

Registration No 5-86134 File No. A(7-2)26dad

DOUGLAS H. KIDDER
Previous Owner

Box 2912 NEW RIVER STG. #1
Address

PHOENIX AZ 85029
City State Zip

Walter D. Ottney
New Owner

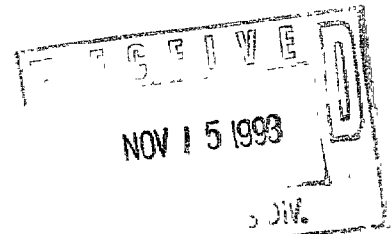
P.O. Box 41073
Address

Phoenix Ariz 85080
City State zip

NOTE: ARS 45-594 requires that the Department be notified of change in well ownership and that well owner is required to keep the Department well registration records current and accurate. Well data and ownership changes must be submitted within 30 days after changes take place.

MICROFILMED

ARIZONA DEPARTMENT OF WATER RESOURCES
OPERATIONS DIVISION
15 SOUTH 15TH AVENUE
PHOENIX, ARIZONA 85007



CHANGE OF WELL INFORMATION

Well Registration No. 55- 86134 File No. A (7-2) 26 dad
(location)

I/We request the following well information be changed: _____

Property Deed

Date: 11/10/93 Signature of Current Well Owner _____

(DO NOT CUT THIS FORM IN HALF)

STATEMENT OF CHANGE OF WELL OWNERSHIP

I, Vince Cedola, state that I am (~~no longer~~) the (new)
(please print)
owner of the well described below:

Township 7N Range 2E Section 26; SE 1/4 NE 1/4 SE 1/4

Well Registration No. 55- 86134

File No. A (7-2) 26 dad
(location)

WALTER OTTNEY
PRINT Previous Owner's Name
(APODACA)

Vince Cedola
PRINT New Owner's Name

Address _____

Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Dated: 11-10-93 Signature of New Owner Vince Cedola

MICROFILMED

NOTE: A.R.S. §45-593(C) requires that the Department be notified of change of well ownership and that the well owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within thirty (30) days after changes take place.

SAVE THIS FORM TO REPORT FUTURE CHANGES IN OWNERSHIP, CHANGES IN ADDRESS, OR CHANGE IN WELL DATA SUCH AS PUMP CAPACITY, CORRECTION OF LEGAL DESCRIPTION, CHANGE OF WELL DRILLER AND AMENDING INFORMATION PREVIOUSLY FILED.

ENTERED NOV 15 1993